

TOWN OF EAST HAMPTON
ARCHITECTURAL REVIEW BOARD

AGRICULTURAL OVERLAY DISTRICT
APPROVAL APPLICATION



Please consult with Town Code Section 255-3-35 (C). This application must be fully completed and submitted to the Architectural Review Board, along with the following information:

- 1. Fees: An application fee in the form of certified check, money order or Attorney's check made payable to the Town of East Hampton must be submitted in accordance with the fee schedule below. Fees are entirely nonrefundable once review of the particular application has commenced.
• \$200 for a new residence, new accessory structure or proposed changes to an existing building
• \$350 for work that has commenced prior to obtaining proper approval
2. Two (2) copies (original plus 1 copy) of the completed application form
3. Two (2) copies of a CURRENT scaled survey prepared by a licensed surveyor, accurately showing the location(s) of
• All existing structure(s) on the property
• Proposed improvements drawn to scale
• Proposed landscaping
4. Two (2) copies of complete working drawings, including floor plans and elevations drawn to scale; 1/4" = 1' 0". Note: include on the plans a description of all exterior materials and color. These include roofing, millwork, doors, railings, masonry, etc.

I. APPLICANT INFORMATION

Applicant or Applicant's agent is required to attend Architectural Review Board meeting for review of application
Deadline for submission of Application is the first and third Thursday by Noon

A. Property Owner: Address: Telephone Facsimile:
B. Applicant (if other than Property Owner): Address: Telephone Facsimile:
C. Agent: Address: Telephone Facsimile:
D. Applicant is the (check one) [] Property Owner [] Other:

E. CORRESPONDENCE TO BE SENT TO: (check one) [] A [] B [] C

F. Is this application subject to Site Plan Review? (check one) [] Yes [] No

NOTE: The Board meets the second & fourth Thursday of every month at 6:00 pm in the Court Room of 159 Pantigo Road, East Hampton, N.Y. 11937

II. PROPERTY IDENTIFICATION AND LOCATION

A. Street, House Number & Hamlet:
B. Suffolk County Tax Map Number: 300-
C. Zoning District (circle one): B A A2 A3 A5 MF Other:

III. PROJECT INFORMATION

[] New Residence [] Addition to Residence [] New Accessory Structure [] Exterior Change to Existing Building

Description of proposed improvements or changes:

List each structure or activity proposed including dimensions, number of stories and square footage:

	Structure	Dimensions	No. of Stories	Total Sq. Ft.
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____

I attest that the above information is complete and accurate to the best of my knowledge.

I, the owner, hereby authorize the Architectural Review Board to enter the subject parcel to review the pending application for ARB approval.

Signature: _____ Date:_____

Revised July 14, 2015